## LOBBYIST ANNUAL REPORT FORM



State of Idaho

Ben Ysursa Secretary of State To Be Filed By:

LOBBYISTS (Sec. 67-6619)

Page of Page(s)
THIS SPACE FOR OFFICE USE ONLY

			learly in black ink) at bottom of page					CONTRACT STATE			
11		permanent busine	ess address		D	ate prepared		Period	covered		
MAK	CK B.	WOODS				1-4-6	~ 7	7	year ending		
5/7	PA	1/103	11/5		1	1-4-0	07	(Mo.	) (Day) (Yr.)		
555 DEINHARD LANE MCCAU, ID. 83638								12 31 06			
Item			le expenditures made or	incurred b	y Lobbyist o	or by Lobbyist's Emp	loyer on beha				
Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported  * Total Amount for All Employers					nate amounts of bottom of pa	ontributed by each employer ( <b>Identify employers, under</b> ge.)			s, under		
			All Employers	Emplo	yer No. 1	Employer No. 2	Employe	er No. 3	Employer No. 4		
Enterta Food a	inment nd Refreshm	nent	s <u>894.97</u>	\$ <u>8</u>	<u>94.97</u>	\$	\$		\$		
Living	Accommoda	ations	1276.14	12	76,14						
Advert	ising										
Travel			150.86		50.86						
Teleph	one										
Other I	Expenses or	Services	22.18		22.18						
		Total	s <u>2344.15</u>	\$ _2	344.15	\$	\$		\$		
*1	When the num	ber of employers	you are reporting for requi	res multiple	L-2 forms to	 be filed a total amount f	or all employe	rs should be	entered on Page 1.		
Item			iture of more than fifty d		0) for a legis	lator or other holder	of public offic	ce.			
	Date		Place		Amoun	Names	of Legislators	& Public Of	fficials in Group		
	Continued on	attached page(s)									
┌┈	Continued on		RUCTIONS			em E	mployer(s) Na	yer(s) Name(s) and Address(es)			
		insi	RUCTIONS				Timber	Profe	chivé Assoc., Inc		
	o should file		ny lobbyist registered u	nder Sect	NT. 1	555 Deinh	and lar	10			
			ort is due on January 31	st.	No.2	2					
TO	BE FILED	WITH:									
Ben Ysursa Secretary of State PO Box 83720						No.3					
	Pho		ID 83720-0080 2852 Fax: (208) 334-2	282	No.4	No.4					

Item 4			made by the lobbyist or by the lobbyist's employer in the nature of contributions of money or other tangible or intangible erty to any Legislator, or for or on behalf of any legislator.								
	D	ate	Amount		Name of Legislator Receiving or Benefited						
N/A											
İtem	or House Bill. Kesolution of other legislative activity in which				LEGISLATIVE SUBJECT IDENTIFICATION						
Subject (from	the Lot t Code table)	Bill, Resolution or other Legislative Ident. Number		r legislative activity in which pposing.  Appropriation Bill Number	01 02 03 04 05 06 07 08 09 10 11	Subject Agriculture, horticulture, farming, and livestock Amusements, games, athletics and sports Banking, finance, credit and investments Children, minors, youth, senior citizens Church and religion Consumer affairs Ecology, environment, pollution, conservation, zoning, land and water use Education Elections, campaigns, voting, political parties Equal rights, civil rights, minority affairs Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds Government, county Government, federal Government, municipal Government, special districts Government, state	20 21 22 23 24 25 26 27 28 29 30	Subject Health service, medicine, drugs and controlled substances, health insurance, hospitals Higher education Housing, construction, codes Insurance (excluding health insurance) Labor, salaries and wages, collective bargaining Law enforcement, courts, judges, crimes, prisons License, permits Liquor Manufacturing, distribution and services Natural resources, forest and forest products, fisheries, mining and mining products Public lands, parks, recreation Social insurance, unemployment insurance, public assistance, workmen's compensation Transportation, highways, streets and roads Utilities, communications, televisions, radio, newspaper, power, CATV, gas Other (please specify)			
CERTII	FICATIO	ON: I her	eby certify that the	above is a true, complete and	ī	Lobbyist signature  Date  Lobbyist signature  Date  Date  Employer No. 1 signature  Date  Date					
correct statement in accordance with Section 67-6624 Idaho Code.						Employer No. 4 signature		Date			